

**Social Security Administration**  
**Retirement, Survivors and Disability Insurance**  
Notice of Award

Western Program Service Center  
P.O. Box 2000  
Richmond, California 94802-1791  
Date: November 12, 2022  
BNC#: 22MS241B72986-A



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WENDELL T RIGBY  
1615 COUNTRYSIDE LANE  
HEBER CITY, UT 84032-3572

You are entitled to monthly retirement benefits beginning November 2022.

**What We Will Pay And When**

- You will receive \$1,462.00 for November 2022 around December 14, 2022.
- After that you will receive \$1,462.00 on or about the second Wednesday of each month.
- These and any future payments will go to the financial institution you selected. Please let us know if you change your mailing address, so we can send you letters directly.
- Later in this letter, we will show you how we figured these amounts.

**Your Benefits**

We reduced your Social Security benefits starting November 2022. This is the first month you received a pension based on work not covered by Social Security taxes.

When you receive this type of pension, we may apply the Windfall Elimination Provision to your Social Security benefits. This changes the way we figure your benefit amount. Your benefit amount is less than it would be if you were not receiving the pension.

To learn more about how non-covered pensions affect Social Security benefits, please view our factsheet titled "Windfall Elimination Provision," that you can get at [www.ssa.gov/pubs/](http://www.ssa.gov/pubs/) online.

Enclosure(s):  
Pub 05-10077

We raised your monthly benefit starting November 2022. We gave you credit for months when you were:

- At least full retirement age, and
- Did not receive a retirement benefit because of your work and earnings

### **Information About Medicare**

Your Medicare Part A (hospital insurance) starts November 2017 and Part B (medical insurance) starts June 2018.

You will get a Medicare card within 2 weeks. You should show this card when you need medical care. To learn more about what Medicare covers, visit [Medicare.gov](http://Medicare.gov). If you have questions about your Medicare coverage, call 1-800-MEDICARE (1-800-633-4227).

**IMPORTANT:** A Medicare law requires some higher income persons to pay higher premiums. The law applies to premiums for Medicare Part B (Medical Insurance), prescription drug coverage, and Medicare Part B Immunosuppressive Drug coverage. The law generally affects individuals with incomes higher than \$85,000 and couples with incomes higher than \$170,000. We will contact the Internal Revenue Service to get information about your income. If we decide that you have to pay higher premiums, we will send a letter explaining our decision. The higher amount will be effective June 2018. For more information, please visit [www.ssa.gov](http://www.ssa.gov) on the Internet or call us toll-free at 1-800-772-1213 (TTY 1-800-325-0778).



### **Medicare Prescription Drug Plan Enrollment**

Now that you are eligible for Medicare, you can enroll in a Medicare prescription drug plan (Part D).

To learn more about the Medicare prescription drug plans and when you can enroll, visit [www.medicare.gov](http://www.medicare.gov) or call 1-800-MEDICARE (1-800-633-4227; TTY 1-877-486-2048). Medicare also can tell you about agencies in your area that can help you choose your prescription drug coverage.

If you have limited income and resources, we encourage you to apply for the extra help that is available to assist with Medicare prescription drug costs. The extra help can pay the monthly premiums, annual deductibles and prescription co-payments. To learn more or apply, please contact us.

### **Other Social Security Benefits**

This benefit is the only benefit you can receive from us at this time. In the future, if you think you might qualify for another benefit from us, you will need to apply again.

### **Your Responsibilities**

Your benefits are based on the information you gave us. If this information changes, it could affect your benefits. For this reason, it is important that you report changes to us right away.

We have enclosed a pamphlet, "What You Need To Know When You Get Retirement Or Survivors Benefits". It tells you what must be reported and how to report.

### **Your Benefits May Be Taxed**

You may have to pay taxes on the benefits you get from us. Part of your Social Security benefits may be taxed if:

- you are single and your total income is more than \$25,000 or
- you are married and you and your spouse have total income of more than \$32,000.

You can decide if you want to have federal taxes withheld from your benefits. If you want taxes withheld, you need to complete and return a Form W-4V, Voluntary Withholding Request. You can get Form W-4V from the Internal Revenue Service by calling 1-800-829-3676. You can also get this form at [www.socialsecurity.gov/planners/taxes.htm](http://www.socialsecurity.gov/planners/taxes.htm) on our website. After you complete and sign the form, return it to your local Social Security office by mail or in person.

You can find more information on paying taxes in the enclosed pamphlet, "What You Need To Know When You Get Retirement Or Survivors Benefits".

### **Do You Disagree With The Decision?**

If you do not agree with this decision, you have the right to appeal. We will review your case and look at any new facts you have. A person who did not make the first decision will decide your case. We will review the parts of the decision that you think are wrong and correct any mistakes. We will make a decision that may or may not be in your favor.

- You have 60 days to ask for an appeal.
- The 60 days start the day after you receive this letter. We assume you received this letter 5 days after the date on it unless you show us that you did not receive it within the 5-day period.
- You must have a good reason for waiting more than 60 days to ask for an appeal.
- You must ask for an appeal in writing. Please use our "Request for Reconsideration" form, SSA-561-U2. You may go to our website at [www.ssa.gov/forms/](http://www.ssa.gov/forms/) to locate the form. You can also contact us to request the form, or if you need help filling out the form.

### **If You Want Help With Your Appeal**

You can have a friend, representative, or someone else help you. There are groups that can help you find a representative or give you free legal services if you qualify. There are also representatives who do not charge unless you win your appeal. Your local Social Security office has a list of groups that can help you with your appeal.

If you get someone to help you, you should let us know. If you hire someone, we must approve the fee before he or she can collect it. And if you hire a representative who is eligible for direct pay, we will withhold up to 25 percent of any past due benefits to pay toward the fee.

**Suspect Social Security Fraud?**

Please visit <http://oig.ssa.gov/r> or call the Inspector General's Fraud Hotline at 1-800-269-0271 (TTY 1-866-501-2101).

**If You Have Questions****Need more help?**

1. Visit [www.ssa.gov](http://www.ssa.gov) for fast, simple, and secure online service.
2. Call us at 1-800-772-1213, weekdays from 8:00 am to 7:00 pm. If you are deaf or hard of hearing, call TTY 1-800-325-0778. Please mention this letter when you call.
3. You may also call your local office at 1-866-366-9549.

SOCIAL SECURITY  
J. WILL ROBINSON FOB  
88 WEST 100 NORTH  
PROVO UT 84601

**How are we doing?** Go to [www.ssa.gov/feedback](http://www.ssa.gov/feedback) to tell us.

*Social Security Administration*

**PAYMENT SUMMARY****Your Regular Monthly Payment**

Here is how we figured your  
regular monthly payment effective November 2022:

You are entitled to a monthly benefit of .....\$ 1,632.80

Amounts we subtracted because of:

● premiums for medical insurance ..... 170.10

This equals ..... 1,462.70

● rounding (we must round down to  
a whole dollar) ..... .70

This equals the amount of  
your regular monthly payment .....\$ 1,462.00



